Indiana State Police Clandestine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	1-26-2014	Address:	124 N. Main St Apt. 3
Incident #:	14ISPC000639		Columbia City, IN
County :	Whitley		46725
Type of Laboratory Seizure (check one) Seizure Location (check all that apply)			
☑ Operational Lab☐ Chemical/Glassware/Equipment (only)☐ Dumpsite (only)		☐ Residence☐ Outbuilding☐ Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:
(check all that	l: Location (bedroom, kitchen, open air, of apply) or Birch Reaction(s):	etc)	
Red Phosphorous/Iodine Reaction(s):			
Hydrochloric Acid Gas Generator(s): Bedroom			
☐ Flammable Solvents: <u>Kitchen</u>			
Water Reactive Metal (Lithium): <u>Kitchen</u>			
Anhydrous Ammonia:			
Corrosive Acid: <u>Kitchen</u>			
Corrosive Base: <u>Kitchen</u>			
Other (item and location): <u>Ammonia Nitrate/Kitchen</u>			
Vehicle Info	rmation:		
Owner: VIN: Year:		Make: Model:	
☐ Yes ☐ No	age 18 discovered (check appropriate) (number present) not present but evidence they reside	unclean Estimated les occurring:	tions of home: clean disarray
This report l	has been faxed* or emailed to the fol	llowing agencies tha	at serve the location:
Fire Department City, Township or County Columbia City Health Department County: Whitley Fax: Emailed Department of Child Services Hotline: dcshotlinereports@dcs.in.gov Fax: 317-234-7595 or 317-234-7596			
	ormation regarding this methamphetan Officer: S/Trp. Tim Myers Phone	nine laboratory, cont e <u>260-432-8661</u>	tact
*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of			

scene processing.